

| POSITION                  | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|------|
| FEE DETERMINATION         |          |        | 6/11 |
| O.I.P.E. CLASSIFIER       |          |        | 6/11 |
| FORMALITY REVIEW          |          |        | 6/11 |
| RESPONSE FORMALITY REVIEW |          |        | 6/11 |
|                           |          |        |      |

## **INDEX OF CLAIMS**

|                           |            |         |              |
|---------------------------|------------|---------|--------------|
| ✓ .....                   | Rejected   | N ..... | Non-elected  |
| = .....                   | Allowed    | I ..... | Interference |
| → (Through numeral) ..... | Canceled   | A ..... | Appeal       |
| ÷ .....                   | Restricted | O ..... | Objected     |

| Claim    | Date    |
|----------|---------|
| Original |         |
| Final    |         |
| 5        | 11/7/   |
| 6        | 12/2/21 |
| 7        | 12/2/03 |
| 8        | ✓✓✓     |
| 9        | —       |
| 10       | —       |
| 11       | —       |
| 12       | —       |
| 13       | —       |
| 14       | —       |
| 15       | ✓✓      |
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| Claim             | Date |
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| Claim             | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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